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SIR WILLIAM OSLER (1849-1919)

AFTER a tedious and painful illness, Sir William Osler, Regius professor of medicine at Oxford, died at his home in Norham Gardens on December 9, 1919. In spite of intermediate convalescence, a severe attack of bronchitis, due to exposure through attending a professional consultation, developed into a pneumonia with pleurisy and empyema, necessitating surgical drainage; and although he had been cheerful three days before his death, the end was gravely apprehended by those around him. He is survived by his widow, Lady Osler, and two brothers, his only son having been killed in the war.

Sir William Osler, the son of Rev. F. L. Osler of Falmouth, England, was born at Bond Head, Province of Ontario, Canada, on July 12, 1849. A medical graduate of McGill University (1872) with the customary post graduate study in the London clinics and German universities, he became lecturer and professor of the institutes of medicine at McGill in 1874 and easily rose, without stress or undue effort, to the top of his profession. In succession, he was professor of medicine at the University of Pennsylvania (1884-9) and the Johns Hopkins University (1889-1904), was appointed Regius professor of medicine at the University of Oxford in 1904 and received his baronetcy in 1911. On July 11, 1919, his seventieth birthday was honored by the presentation of two anniversary volumes made up of contributions by English and American colleagues.¹ Due to delays in

printing, the completed volumes reached him only a few days before his death.

Of Osler's scientific work, it may be said that no great physician has been more firmly grounded in the fundamental disciplines of his calling. Of the arduous years of post-mortem work at Montreal the Pathological Reports of the Montreal General Hospital (1876-80) are a permanent record, as also the eight editions of the great text-book on Practice of Medicine (1892), which has been translated into French, German, Spanish and Chinese. The disciple of Morgagni and Virchow is equally apparent in the hundreds of clinical papers, the larger monographs in Osler's "Modern Medicine" (1907-10), the Gullstonian lectures on malignant endocarditis (1885), and the separate treatises on the cerebral palsies of children (1889), chorea (1894), abdominal tumors (1895), angina pectoris (1897), and cancer of the stomach (1900). From the start he did much original investigation of high quality. At the age of twenty-five (1874), he described the blood platelets associated with the name of Bizzozero, and defined their status as the third corpuscle of the blood and their relation to the formation of thrombi. Such early papers as those on the blood in pernicious anemia (1877), overstrain of the heart (1878), fusion of the semi-lunar valves (1880) reveal the born clinical and pathological observer. Osler was a profound student of all modes of aneurism, of tuberculosis, of typhoid fever, of disorders of the circulation. He was the first to emphasize the relation between mycotic

¹ *SCIENCE*, September 12, 1919, p. 244.

aneurism and mycotic endocarditis, first described the ball-valve thrombus at the mitral orifice, the visceral complication of erythema multiforme (1895), chronic cyanosis with polycythemia, known as Vaquez' disease (1895), multiple telangiectasis (1901), the erythematous spots in malignant endocarditis (1908), and he discovered the parasite of verminous bronchitis in dogs (*filaria Osleri*, 1877). But to sense the magnitude of Osler's clinical work, it must be taken by and large in the 730 titles of the recently published Osler Bibliography (1919).

At the farewell banquet given him in New York in 1904, Osler said that he desired to be remembered in a single line: "He taught clinical medicine in the wards." He found his great opportunity when he became physician to the Johns Hopkins Hospital. During the six years intervening between the opening of the hospital (1889) and the beginning of undergraduate instruction in medicine (1893), Osler blocked out the arrangements for a graded whole-time upper resident staff of men of exceptional promise, a lower resident staff of one year internes, careful instruction in case-taking and clinical laboratory work for third year students and the appointment of fourth year students as "clinical clerks," in actual charge of patients in hospital, for three months each. The feeling of confidence and of personal responsibility acquired by these advantages was further strengthened by assigning advanced pupils to teach extempore, to read and report on foreign literature, to cultivate the history of their profession. In his Saturday night meetings at his home in West Franklin Street, his aim with young students was to make good physicians of them, to make good men out of them, to teach them to think for themselves and to be themselves. As Dr. H. M. Thomas has said, Osler "put the students in the wards, but he did not leave them there; he stayed with them"; and he adds: "What good there is in me as a teacher and a physician I owe to him." This is the common sentiment, that he took his students with him into the upper reaches of their profession and

the broad sunshine of actual life. Only Astley Cooper or Carl Ludwig could have produced such a train of loyal disciples; only Pasteur could have inspired such universal regard and affection.

Space permits but a passing reference to Osler's work on the history of medicine, to which, through his personal interest and his many unique contributions, he gave a greater impetus than any other; to his civic activities, his labors in behalf of medical libraries, his splendid service to his country in wartime. His great collection of original texts and documents relating to discoveries and advances in the science and art of medicine, the hobby of his later years, was all but completed as to items, but the big human touch which would have made its catalogue one of the unique things in medical bibliography could only have been given by Osler himself.

Essentially English in character, Osler had, through his forebears, Cornish and Spanish elements in his composition, easily sensed in the "hauntings of Celtism" in his ringing eloquent voice, the suggestion of the hidalgo in his slender, aristocratic figure, the clean-cut features and the tropical brown eyes. His was the longish head of the man of action, the active practitioner against disease and pain. Osler's warm glance and utter friendliness of manner told how naturally fond he was of people. He had the gift of making almost any one feel for the moment as if he were set apart as a valued particular friend, and so became, in effect, a kind of universal friend to patients, pupils and colleagues alike. But there was nothing of the politician in him. He rather paid with his person through the demands made by importunate patients and visitors upon his time. Such an effective concentration of the "fluid, attaching character" has seldom been found in a single personality, possessed, as it were, by the impartial, non-exclusive spirit of all pervading Nature, "which never was the friend of one,"

But lit for all its generous sun,
And lived itself, and made us live.

Many are the tales of the clever hoaxing and practical joking put over by Osler on his boon companions and professional fellows in

his salad days, but the chaffing was carried on in such a jolly spirit that it left no sting behind. In his address on the male climacteric, delivered on the occasion of his retirement from the Johns Hopkins faculty, he found to his dismay that he had chaffed a whole nation. The hazards incurred by his chance reference to Trollope's fable about "chloroforming at sixty" have been set forth at undue length in the public press and even on the stage. But Osler's reasoning about the comparative uselessness of men at sixty, in the face of the imposing array of exceptions in Longfellow's "Morituri Salutamus," was obviously an expression of his essential preference for and innate sympathy with the oncoming race of younger people, whose worth he had sensed many times over in his beloved pupils.

The last two years of Sir William Osler's life were clouded by the death of his only son, Lieutenant Revere Osler, an artillery officer and a youth of great promise, who was killed

in the action about Ypres in 1917. This he bore bravely, concealing his grief from his friends and busying himself with his own duties to the sick and wounded, but, the war at an end, his loneliness increased in spite of the companionship of his wife and his ever-generous hospitality to American officers and physicians. Toward the end, his intimates began to realize that he had "trodden the upward and the downward slope" and was done with life. Up to that time he had remained cheerful, buoyant, resilient, as if, like the beloved of the gods, he was predestined to die young. Yet the supreme test was nobly borne, and to many of his pupils and colleagues, who see in the death of this great, benignant physician, the loss of their best friend, the expressions of ancient belief will not seem unavailing: *Requiem æternam dona ei, Domine, et lux perpetua luceat ei.*

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